

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/575720

FILING DATE

APR 13 2006

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
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42						/
43						/
44						/
45						/
46						/
47						/
48						/
49					/	/
50						/
TOTAL IND.		↓		↓	2	↓
TOTAL DEP.		←		←	18	←
TOTAL CLAIMS					20	

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51				/		
52				/		
53				/		
54				/		
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100						
TOTAL IND.		↓	0	↓		↓
TOTAL DEP.		←	10	←		←
TOTAL CLAIMS			10			